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Bib Data Sheet

CONFIRMATION NO. 6543

SERIAL NUMBER 10/644,542	FILING DATE 08/20/2003  RULE	CLASS 331	GROUP ART UNIT 2817	ATTORNEY DOCKET NO. 200208755-1
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\*\* CONTINUING DATA \*\*\*\*\*

*On NONE*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*On NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/16/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>dm</i> Examiner's Signature Initials	CO	1	20	4

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## TITLE

System and method for measuring current

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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☐ 1.18 Fees ( Issue )☐ Other \_\_\_\_\_☐ Credit